Rediscovering Compassion

An Evaluation of Kairos Horizon Communities in Prison

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Overview

For centuries, faith-based and community organizations (FBCOs) have woven a common thread of compassion throughout the fabric of American society. Whether motivated by moral beliefs or a sense of civic duty, these organizations have provided, and continue to provide, a wide-range of social services to prisoners, ex-prisoners, and their families. Traditionally, these services have included the provision of food, shelter, and clothing. Over the years, FBCOs have expanded their social services to include education, employment, and housing assistance. More recently, these services have evolved to embrace counseling, substance abuse treatment, and victim assistance in neighborhoods across the nation. Today, the volunteer-led services provided via FBCOs are vital to increasing public safety and improving the quality of life in communities impacted by incarceration.

As the new millennium advances, the President's Faith-Based and Community Initiative shines as a beacon of light and of hope—building capacity among FBCOs to empower lives, foster families, and contribute to community wellness. In support of the Initiative, the Administration for Children and Families (ACF), within the Department of Health and Human Services, has remained steadfast in strengthening partnerships between the Federal government and FBCOs. As part of ACF, the Compassion Capital Fund (CCF) was established to increase the scale and effectiveness of FBCOs through research and other supportive means. While critics have charged that CCF funding persists in the absence of empirical evidence, the following research findings lend considerable support in favor of capacity building among FBCOs that provide compassionate care and produce promising results.

Caliber Associates recently completed an independent evaluation of Kairos Horizon Communities in Prison—a faith-based residential rehabilitation program. This brief summarizes results of the comprehensive evaluation focusing on pre- and post-release effects of the program. This brief contends that the purpose-driven program model is being implemented as specified, and that program operations do not differ substantially from those initially planned. This brief also points out that the Kairos Horizon program builds social capital (e.g., fostering individual, group and family relationships) and constructs collective efficacy (e.g., creating caring communities on the inside and outside). In addition, this brief argues that program participation increases prison safety (e.g., decreasing discipline reports and segregation stays) and promotes public safety (e.g., delaying the onset of rearrest). Finally, this brief concludes that the Kairos Horizon experience encourages self-sufficiency and improves outcomes for children and families (e.g., program graduates are more likely to meet child support obligations). These findings potentially demonstrate the efficacy of strong FBCOs in providing social services to support the successful reintegration of returning prisoners. Among the key lessons learned is that engaging FBCOs in collaborative problem-solving partnerships may facilitate the process of prisoner reentry—and individuals rediscovering their compassion for children, families and communities.

Process Evaluation

The process evaluation describes how the Kairos Horizon program operates at the Tomoka Correctional Institution in Daytona Beach, Florida. The evaluation team employed various approaches for collecting case study data. Among these approaches are program documentation, semi-structured interviews, on-site observations, and focus groups. Caliber's research team collected and assessed available program documentation, analyzing the content of nearly 150 documents to address questions concerning program implementation in the context of stated goals and objectives. Special emphasis was placed on identifying the target population (who participated), types of service

(how was the target population served), and the timing of interventions (when the intervention occurred). The team also conducted a series of semi-structured interviews with key personnel and stakeholders to discuss the reality of the program experience. Key stakeholders were identified because of their regular contact with the program staff, its participants, or other individuals who may benefit from the Kairos Horizon program. The interviewees were correctional staff at the facility including the warden, assistant wardens, work supervisors, the prison chaplain, and correctional officers; and program staff including the Executive Directors, Program Coordinators, and volunteers. While interview protocols included specific questions regarding program issues and practices, they also included the discussion of unanticipated factors associated with program implementation and outcomes. In addition, the research team used on-site observations as a method for validating information collected during the interviews. These observations were guided by site visit protocols designed to ensure that the interview information was verified and that consistent procedures for collecting program data were utilized. Finally, the team convened focus groups to understand perceptions of the program from the perspective of participants through discussions facilitated by researchers. Several general questions were selected to guide focus group discussions of program policy, procedures, and practices.

Established in 1976, Kairos Prison Ministry is an ecumenical ministry began at the Union Correctional Institution at Raiford, Florida. Kairos is a Greek word that means "God's Special Time". Sponsored programs include Kairos Outside (a ministry to support women whose loved ones are incarcerated), Kairos Torch (a ministry to detainees in juvenile detention facilities), and Kairos Horizon (faith-based residential programs in prisons). Today, the ministry is active in 25 maximum and medium security prisons in Florida, and over 225 other prisons and correctional settings across the U.S., Canada, England, South Africa, and Australia.

The Kairos Horizon program at Tomoka Prison was begun in 1999. The faith-based residential rehabilitation program for prisoners and their families seeks to address the whole person by offering mental, spiritual, and emotional support. Specifically, the yearlong program has three main goals including increasing individual accountability, family responsibility, and employability in the community. Among the primary objectives of the program are to create a faith-centered community that provides an atmosphere promoting spiritual enlightenment, inner growth, and respect for oneself and others. These goals and objectives are achieved through a variety of volunteer-led courses including anger management and conflict resolution, family relations and fatherhood, financial management and informal mentoring, and substance abuse prevention and treatment. In addition, program participants attend their choice of religious program activities involving daily devotionals, prayer, and worship.

Results of the Kairos Horizon process evaluation show that program operations do not differ substantially from those initially planned. Program goals have remained focused on increasing individual accountability, family responsibility, and employability in the community. Similarly, selection criteria (e.g., honesty, openness, and willingness to participate) and program rules (e.g., prohibitions against abusive language, excessive noise, and pornography) have been consistent. While program operations have experienced continuity, program activities have experienced change that may affect outcomes. For example, the institution has discontinued basic education-GED and tutoring programs, and computer training is no longer included in the program curriculum—which potentially have profound implications for employment prospects among ex-prisoners.

Process evaluation results also show that the program has experienced unintended consequences and unanticipated outcomes. For example, attrition is perhaps the primary barrier to program implementation. In most instances, individuals decide that they are not prepared to meet the rigorous requirements for program completion and voluntarily withdraw. Prisoners that withdraw from the program can be considered as potential candidates in the future. Other reasons for attrition include participant transfers (e.g., to other facilities or units) and removal for cause (e.g., rule infractions including violence, stealing, or drug use). Still other reasons for not graduating from the program include medical concerns (e.g., mental health issues), court appearances (e.g., court dates resulting in repeated or long-term absence), and early release from prison. The program has

addressed attrition concerns by continuously reviewing selection criteria and disciplinary processes.

In addition, Kairos Horizon process evaluation results show that the program offers a variety of rehabilitative services to prisoners while meeting the security needs inherent in a prison environment. Both program and prison staffers recognize the importance of holistic programming and a multi-modal approach that includes both spiritual and secular approaches. The successful implementation of the program is, in part, attributed to common goals among corrections professionals and program practitioners including increasing prison safety, promoting public safety, and achieving self-sufficiency. Consistently, there has also been a great deal of interest in the program, so much so that the Department of Corrections has implemented similar programs across the state and instituted a waiting list for new participants.

During the process evaluation, stakeholders described the influence of volunteers as perhaps the most critical component of the program. Local church volunteers are viewed as the key to building social relationships and strengthen social bonds to achieve the goals of the program. Volunteers are also instrumental in fostering and restoring individual, group, and family relationships. In addition, church volunteers are essential to creating caring communities that embrace multiple faiths in both correctional and neighborhood environs. Consistently, process evaluation results suggest that the Kairos Horizon experience potentially builds social capital (the resource stemming from the structure of social relationships which in turn facilitates the achievement of mutually beneficial goals) and constructs collective efficacy (the ability of neighbors to care for one another). To the extent that Kairos Horizon program participants demonstrate reduced problem behaviors including pre-release discipline reports and post-release recidivism—this finding would contribute to a growing body of empirical evidence indicating that faith-based interventions potentially reduce a variety of social problems.

IMPACT EVALUATION

The impact evaluation examines the effects of the Kairos Horizon program on participants and their families. Program participants are compared to two groups: a matched sample of prisoners drawn from the general prison population, and another sample of individuals on the waiting list for the program who did not subsequently participate. The study examines program effects that occur while participants are still incarcerated and after they have been released. Observed in-prison effects include reductions in discipline reports, participation in prison programs and work assignments, and stays in segregation. Observed post-prison effects include reductions in reliance on state agencies such as Departments of Correction, Revenue, and Child and Family Services. Specific outcome evaluation questions include: Does Kairos Horizon participation

- Result in fewer discipline reports and segregation stays, thereby creating a safer prison environment?
- Provide prisoners with tools for successful reintegration, as evidenced by low recidivism rates?

Methodology

To examine these research questions, this study examined the behavior of all Kairos Horizon participants during its first three years of operation. Participants' post-program outcomes were compared to their in-prison behavior prior to entering the program. In addition, a subsample of the Kairos Horizon participants was compared to two groups of similar prisoners who did not participate in the program. All groups were measured on outcomes related to prison safety, participation in prison activities, public safety, and bonds to family members.

The study samples were collected to evaluate the impact of the Kairos Horizon program on in-prison and post-release measures. The study samples were defined with consideration of program eligibility criteria, data already collected by the Florida Department of Corrections, and methodological rigor. The sample of Kairos Horizon participants was collected from program and prison records and includes all prisoners who participated in the program in one of its first

five classes. Classes last one year, and a new class begins every six months. Class 1 began in November 1999, lasting until October 2000; Class 2 began in May 2000, lasting until April 2001; and so on. Cutting the sample collection period off at Class 5 (which ended in October 2002) allows for at least one year of follow-up data for all Kairos Horizon sample members. Data collected from the treatment sample will allow for comparison of within-sample change prior to and after program participation. Everyone who initiated the program during the sample collection period will be included in this sample, regardless of when or how the participant exited the program. This sample definition will reduce selection bias present had we only included program graduates in the Kairos Horizon sample.

The Kairos Horizon evaluation not only examines the impact of the program on changes in participant behavior over time, but also compares observed participant outcomes to two comparison groups. Approximately two years after the program was implemented at Tomoka Correctional Facility, the Florida Department of Corrections implemented similar faith-based programs in other prisons across the state. The Department of Corrections also implemented a statewide faith-based ranking system at this time to place interested prisoners in one of the faith-based programs, including Kairos Horizon. Each inmate received a faith-based ranking that indicated (1) whether he was eligible for a faith-based program, and (2) whether he was interested in participating in a faith-based program. Eligible prisoners are within 36 months of release from prison and have no discipline reports in the past three months. This faith-based ranking was used to select two comparison samples for this evaluation and match them to Kairos Horizon sample members who participated in the program after September 2001 (Classes 4 and 5 from the Horizon sample make up this treatment sample). Comparison sample members were drawn from prisoners incarcerated at the same time as treatment sample members in Kairos Horizon Classes 4 and 5, between November 2001 and October 2002.

Comparison sample members were selected from two institutions similar to Tomoka: Washington and Taylor Correctional Institutions. First, the matched comparison sample consists of prisoners incarcerated at Washington or Taylor Correctional Institutions who were incarcerated at the same time as the treatment sample and were eligible for the faith-based program, but said "no" when asked if they wanted to participate. Second, the waiting list sample was specifically collected to control for selection bias. Because the treatment sample volunteers to participate in the Kairos Horizon program, there may be some pre-existing characteristic that predicts both participation in the program and any observed outcomes. If this is the case and we do not control for that pre-existing characteristic, any observed differences between treatment and comparison samples may not be due to the program of interest. The waiting list comparison sample includes prisoners at Washington or Taylor Correctional Institutions who were incarcerated at the same time as the treatment sample, were eligible for the faith-based program, and said "yes" when asked if they wanted to participate. Unlike the matched comparison sample, the waiting list sample demonstrates a willingness to participate in a faith-based program. Therefore, if there were a pre-existing characteristic that predicts both the observed outcomes and willingness to participate in a faith-based program, that characteristic would be evident in both the waiting list and treatment samples. Any observed differences between these two samples then is more likely due to the independent variable, participation in the Kairos Horizon program. Waiting list sample members who are subsequently placed in the Kairos Horizon program during the sample collection period were removed from the waiting list sample and became part of the treatment sample.

Based on these sample definitions, change within sample over time will be examined using information collected from the Kairos Horizon sample, which includes all prisoners who participated in the program in Classes 1 through 5. Treatment (Horizon Classes 4 and 5) and comparison sample members will then be compared on in-prison and post-release outcomes. Comparison sample members were also eligible for the Horizon program, and drawn from two institutions similar to Tomoka. Matched comparison sample members were similar to treatment sample members, but did not request placement in a faith-based program. Waiting list sample members did request the program, but did not participate in Kairos Horizon. Sample definitions and sizes are summarized in Table 1.

Table 1. Study Samples

Study Sample	Definition	To assess	N
Horizon	All Horizon participants in Classes 1 through 5	Within-sample change over time	413
Treatment	All Horizon participants in Classes 4 and 5	Across-sample outcomes observed after study start (the program start date for the treatment sample)	157
Matched Comparison	Inmates incarcerated between September 2001 and October 2002 at Washington or Taylor Institutions who were eligible for a faith-based program, but chose not to participate	Across-sample outcomes observed after study start (matched to date of treatment start for matched comparison members)	157
Waiting List Comparison	Inmates incarcerated between September 2001 and October 2002 at Washington or Taylor Institutions who were eligible for and requested participation in a faith-based program, but did not participate in the Horizon program	Across-sample outcomes observed after study start (date of request for faith-based program)	248

Follow-up Period

The outcome evaluation includes a variable follow-up period to allow collection of outcome measures for as long as possible with each sample member. This variable follow-up period is necessary to allow as many sample members as possible to be released and tracked on outcome measures while they are in the community. Study samples are tracked on in-prison measures (e.g., discipline reports) while still incarcerated, and post-release measures (e.g., recidivism) once released. The nature of the inmate population means that some will remain in prison for a small portion of the follow-up period, while others may be incarcerated for the entire follow-up period.

Each sample member will be tracked from the time of follow-up period start until the data collection end date, November 2003. The follow-up period start date is the Kairos Horizon start date for Horizon and treatment samples, the matched date of treatment start for matched comparison sample members, and the date of request for a faith-based program for the waiting list comparison sample. The data collection end date was set to allow at least a 1-year follow-up period for all sample members, and a longer follow-up period for participants with earlier follow-up period start dates. For example, the first class of Horizon participants completed the program at the end of 2000, and can be tracked on outcome measures for four years during and after the expected treatment period (all of 2000, 2001, 2002, and 2003). The classes that completed the program in 2001 will also be followed until the follow-up period end date, which will be three years, and the final classes to be included in the treatment sample completed the program at the end of 2002, with a 2-year follow-up period through the late 2003.

Measures

A number of measures were collected for all study sample members to reflect their treatment experiences, incarceration experiences, initial arrest characteristics, and to compare the samples on various in-prison and post-release measures. Data were collected from the Kairos Horizon program records, the Florida Department of Corrections (DC), the Florida Department of Revenue (DR), and the Florida Department of Children and Families (DCF). Data related to Kairos Horizon treatment sample members was collected from the programs data systems and verified wherever possible with the DC database. These measures include program start and end dates, total time spent in treatment during the study period, Kairos Horizon Class attended, and program exit reason. Program exit reasons were classified as positive if the participant graduated from the program or reached the end of his sentence. Negative reasons include removal for breaking program rules such as fighting or sex

Table 2: Horizon Sample Background and Treatment Characteristics

Measure	All Horizon Classes (N = 413)	
	N	%
Race		
Black	164	39.7%
White	234	56.7%
Hispanic	12	2.9%
Other	3	0.7%
Initial offense type		
Violent	203	49.2%
Property	115	27.8%
Drug	45	10.9%
Other	134	32.4%
Any prior incarcerations?		
Yes	214	51.8%
No	199	48.2%
Incarceration status at follow-up period end		
Incarcerated	248	60.0%
Released	165	40.0%
Horizon Class		
1	82	19.9%
2	108	26.2%
3	63	15.3%
4	65	15.7%
5	92	22.3%
Months in Horizon		
3 mos. or less	71	17.2%
More than 3 mos.	296	71.7%
Horizon exit reason		
Positive	212	56.1%
Negative	41	10.8%
Neutral	125	33.1%
Measure	Mean	SD
Age at study start	38.54	8.81
Years incarcerated prior to study start	5.60	5.71
Number of current offense charges	2.01	1.81
Number of prior incarcerations	1.18	1.55
Months in Horizon	8.53	4.51
In-prison follow-up period months	25.92	11.89
Post-release follow-up period months	15.28	10.14

acts, possessing a weapon or drugs, or removal to a more restrictive setting (e.g., segregation). Neutral exit reasons include voluntary removal from program, an administrative move to another dorm or facility, or removal for psychological or health-related reasons.

Measures related to demographics, prior incarcerations, current incarceration, in-prison measures and recidivism were collected from the DC data system. For all sample members, demographics included age and race. Prior offending measures included years incarcerated at time of study start, number of prior incarcerations, and initial offense type (the initial offense is the most serious charge which resulted in the current incarceration). Sample background and treatment characteristics are presented in Table 2. The Horizon sample was mostly White (56.7%) and 38.5 years old at the time of program participation. Half of the sample was incarcerated for a violent offense (49.2%), and had been incarcerated for an average of 5.6 years prior to program entry. The majority of the sample spent more than three months in treatment (averaging 8.5 months) and exited the program for a positive reason, such as graduation or release from prison (56.1%). Forty percent of the sample was released during the follow-up period, allowing for an average of 25.9 months of in-prison follow-up and 15.3 months of post-release follow-up. All available background and treatment characteristics will be used to predict changes from pre- to post-program behavior among Horizon sample members.

Treatment and comparison samples differed on a number of background characteristics. Treatment sample members were significantly less likely to be African-American and were significantly older compared to waiting list sample members. Treatment sample members were significantly more likely to have an initial offense for a violent crime, and significantly less likely to have a prior incarceration than both comparison samples. Treatment sample members were also incarcerated significantly longer than the comparison samples at study start. All significant differences between treatment and comparison samples, including length of in-prison and post-release follow-up period, will be controlled in all outcome analyses.

All in-prison outcome measures were collected from the DC database and based on six-month intervals both before and after follow-up period start. For the Horizon sample, in-prison outcomes after treatment start were compared to a baseline collected between 7 and 12 months prior to study start. Outcomes were then compared to this baseline at six-month intervals after study start until release from prison. Treatment and comparison samples were also compared on in-prison outcomes collected at six-month intervals after the follow-up period start date. In prison outcomes include whether there were any discipline reports during the six-month interval, the average number of discipline reports per month, whether there were any segregation stays during the six month interval, and the average number of segregation days per month. Information about prison program attendance and job assignments was also collected for periods before, during, and after expected program participation (or matched dates of study start for comparison samples).

Post-release data were collected from the DC database, the Florida Department of Revenue (DR), and the Florida Department for Children and Families (DCF) for released sample members only. Corrections measures included the incidence, number and type of: parole revocations, rearrests, and reoffenses. Rearrests are any arrests recorded by law enforcement agencies in the state of Florida. Reoffenses are those felony arrests that result in prison incarceration or community corrections sentence, and excludes any arrests that do not lead to such a sentence (e.g., a fine or a jail sentence).

Florida Department of Revenue data indicated the child support obligations of study sample members. These measures included the number of open child support cases, the number of children obliged to support in each case, the amount of child support charges accrued during the study period, and the amount of child support paid. The amount accrued and paid was collected every six months from the time of study start for all released sample members with open child support cases in the Department of Revenue. We were unable to match records from the DR and DC databases by social security numbers due to privacy concerns. These data were therefore matched to study sample members by name, date of birth and county of residence (both at

incarceration and at release from prison). This approach to matching may result in some missing data for some study sample members (e.g., those using aliases). However, there is no reason to believe that the missing data will be concentrated in one of the study samples. Similar matching techniques were used to identify study sample members receiving Temporary Aid to Needy Families (TANF) from the DCF. These data proved inconclusive, however, as only one of the study sample members had a record with DCF during the study period. This low return rate is likely due to the fact that TANF funds are typically directed to the child's primary caregiver, who is most often the mother. Because the study sample consists of recently incarcerated males, the likelihood of including a child's primary caregiver small. We were unable to match sample members' to their child's primary caregivers, so were unable to assess any outcomes related to receipt of TANF funds.

Findings

Kairos Horizon impact evaluation results involve pre-release outcomes including discipline reports, segregation stays, job assignments and program attendance while incarcerated. Impact evaluation results also involve post-release outcomes including parole revocations, rearrests, reoffenses, and fulfillment of child support obligations. In each section below, changes within the Horizon sample are discussed, followed by comparisons of the treatment sample to the two comparison samples.

Pre-Release Outcomes

Discipline Reports: Within-Sample Change

Baseline information on discipline reports was collected 7 to 12 months prior to program participation for Horizon sample members. This baseline was selected to avoid any bias associated with the program's eligibility requirements (participants must be discipline report-free for three months prior to program entry). At baseline, about one-fourth of the Horizon sample had at least one discipline report. This proportion declined at each of the six data collection points following program participation, ranging from a low of 12% of the sample having a discipline report during the first six months after program participation to a high of 16% in the second six months after program participation. The proportion of Horizon sample members with a discipline report in each follow-up period interval is displayed in Figure 1.

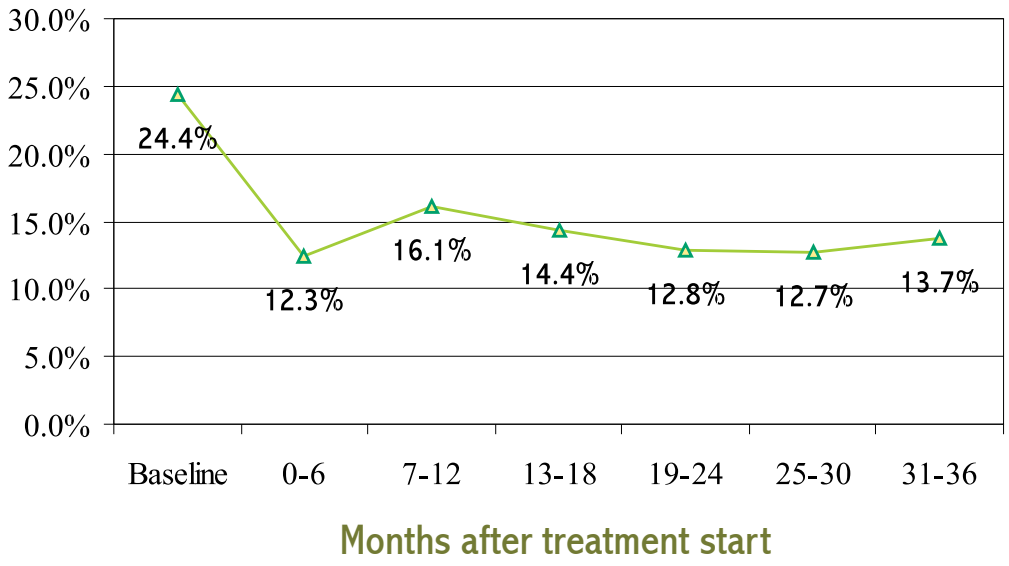
Several factors significantly predicted the proportion of the Horizon sample with a discipline report, including program discharge reason, time in treatment, age, and race. The most consistent predictor of a discipline report was having a negative discharge reason from the program, followed by spending less than three months in treatment, and being younger at program start. The treatment-related predictors appeared to have an impact both during and after the expected period of program participation.

Horizon sample members also experienced reductions in the average number of discipline reports each month in the follow-up period. Sample members averaged 0.06 discipline reports per month at baseline, which declined 50% in 0-6 months and 25-30 months after study start (average number of discipline reports per month in both intervals equal 0.03 per month). Sample members with at least one prior incarceration had a significantly greater decrease from baseline in months 0-6, 13-18, 19-24 and 31-36. Spending three months or less in treatment predicted a significantly greater decrease in the average number of discipline reports per month from baseline to months 19-24 and months 25-30. These results at first seem to indicate that those who spent less time in treatment and were incarcerated previously had more desirable outcomes. In fact, however, these sample members had a higher level of discipline reports at baseline, so had more room for improvement over the follow-up period than sample members who were in treatment for longer periods of time.

Discipline Reports: Across-Sample Comparisons

Comparisons across study samples were only available for a maximum of two years after the study start date due to the sampling definitions for the treatment, matched comparison, and waiting list comparison samples. As expected, the incidence of discipline reports was lowest during months 0-6 for the treatment sample (14% of the sample had a discipline report), with the proportion increasing only slightly in the other follow-up period intervals. By contrast, at least a quarter of the matched and waiting list com-

Figure 1. Proportion of all Horizon participants with at least one discipline report



parison samples had a discipline report in each follow-up period interval (See Figure 2). Controlling for length of the follow-up period interval, the incidence of discipline reports was significantly greater for both comparison samples than the treatment sample in months 0-6 and months 7-12. Compared to the matched comparison sample, treatment sample assignment and impending release from prison significantly predicted a lower incidence of discipline reports in months 0-6, and treatment sample assignment and an initial violent offense significantly predicted a lower incidence of discipline reports in months 7-12. Age mediated the effect of treatment sample assignment when compared to the incidence of discipline reports in the waiting list sample. These same conclusions persisted when considering the average number of discipline reports per month across treatment and comparison samples (i.e., treatment significantly predicted a lower number of reports compared to the matched comparison sample in months 0-6 and 7-12, but the effect of treatment was mediated by age when comparing the average number of reports between treatment and waiting list comparison samples).

These results indicate that the Horizon program is successful at reducing the incidence and frequency of discipline reports at least during the expected program period of one year. Significant differences persisted when comparing the incidence and frequency of discipline reports between the treatment and matched comparison samples, but not when comparing the treatment and waiting list samples. Therefore, treatment sample members have comparatively lower levels of discipline reports, but this difference may be mediated by pre-existing characteristics, such as age and a desire to participate in a faith-based program.

Segregation Stays: Within-Sample Change

One-fifth of Horizon participants had a segregation stay at baseline. This proportion decreased after program participation, particularly in months 0-6 after program start. The proportion increased to between 15 and 18% thereafter (See Figure 3). A negative exit reason and spending less than three months in treatment were consistent and significant predictors of a higher incidence of segregation stays throughout the follow-up period compared to other treatment and background covariates. This effect was

most evident during and immediately following the expected program period.

At baseline, Horizon sample members averaged 1.2 days in segregation per month. This average declined to 0.57 days/month in the 0-6 months after treatment start, and to 0.98 and 1.00 days/month in 7-12 months and 13-18 months after treatment start, respectively. After month 19, however, the average number of segregation days per month was greater than baseline. Sample members with a negative exit reason were significantly more likely to have an increase in the average number of days spent in segregation per month from baseline to months 7-12 and to months 31-36. Similarly, spending less than three months in treatment significantly predicted an increase in the average number of segregation days per month from baseline to months 25-30. Horizon participants from Class 1 also had a significantly greater increase in segregation days from baseline to months 31-36 compared to other classes. Class 1 participants were over-represented at the end of the follow-up period (months 31-36), but this finding suggests that the effects of the program may be reduced over time as participants spend more time in the general population as opposed to the segregated living environment offered by the Horizon program. Conversely, it appears that successfully completing the program has both immediate and lasting impact by reducing the number of days spent in segregation compared to baseline.

Segregation Stays: Across-Sample Comparisons

Treatment sample members had a significantly lower incidence of segregation stays compared to both treatment and comparison samples in all follow-up periods except for 19-24 months after study start (likely due to the low number of sample members still available for observation at that time). During the first six months after study start, about 13% of the treatment sample had a segregation stay, compared to 25% each of the matched and waiting list comparison samples. The difference in the incidence of segregation stays between treatment and comparison samples remained at about 15% in months 7-12 and months 13-18 (See Figure 4).

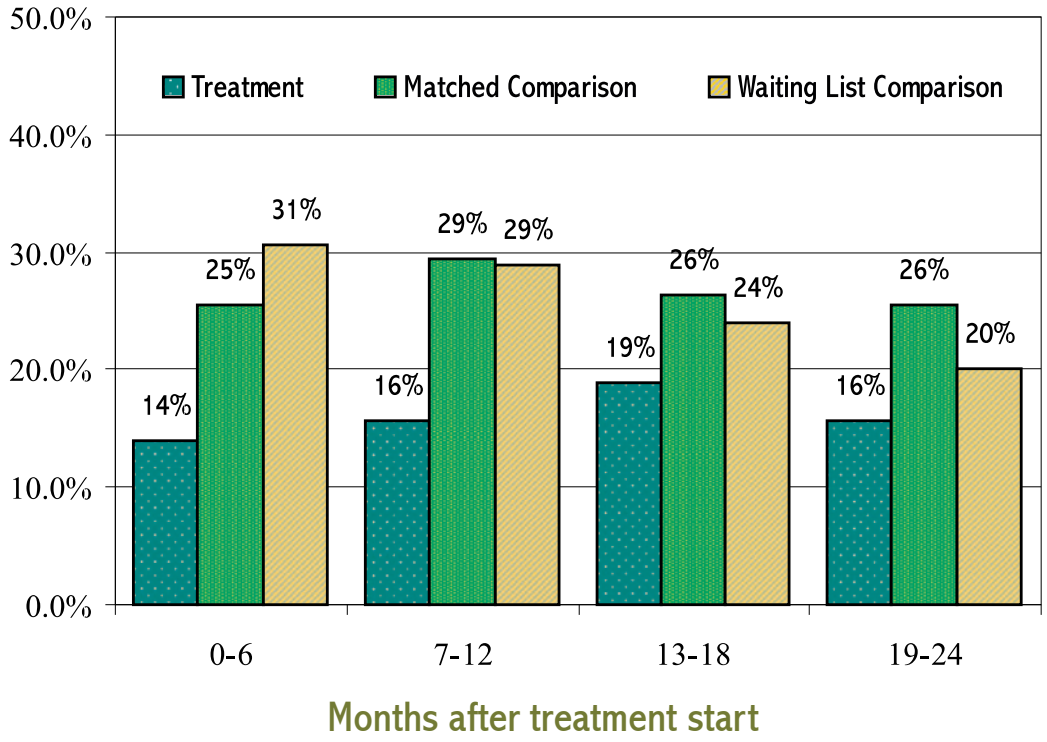
Several background characteristics were also significant predictors of differences between treatment and comparison groups. In months 7-12, violent offenders and treatment sample members were significantly less likely to have a segregation stay compared to the matched comparison sample. An initial offense for a violent crime, being younger, and treatment sample membership were significant predictor of a lower incidence of segregation stays compared to waiting list comparison sample members in months 0-6 and in months 13-18. Age also had an effect in months 7-12 and in months 19-24, mediating the effect of sample assignment when comparing treatment to waiting list sample outcomes.

Treatment sample members averaged 0.79 segregation days per month in the first six months after treatment start, compared to 1.80 days in the matched comparison sample and 1.33 days in the waiting list comparison sample. The average number of segregation days per month increased throughout the follow-up period, reaching 1.91 days per month for the treatment sample in months 19-24. This level was still significantly lower than that of both comparison samples, however (See Figure 5). When comparing the average number of segregation days per month between the treatment and matched comparison samples, treatment sample members had significantly fewer segregation days in months 0-6, 13-18 and 19-24. Compared to the waiting sample, treatment sample members had significantly fewer days in segregation in months 13-18 (age mediated the effect of sample membership in months 7-12).

Post-Release Outcomes

As expected, sample members whose follow-up period began earlier were more likely to be released during the study period. Forty percent of the Horizon sample was released, but only 22% was released and had a year of follow-up after that release date (See Table 3). Because treatment and comparison samples were defined as those incarcerated between 2001 and 2002, even fewer were released before the end of the data collection period (November 2003). About 27% of the treatment sample, 21% of the matched comparison sample, and 37% of the waiting list comparison sample were released during the study period. Five percent

Figure 2. Proportion of sample with at least one discipline report



Note: Months after study start for the treatment sample refers to the period after admission to the Horizon program. For the matched comparison group, months after study start also refers to the period after the treatment sample match is admitted. Months after study start for the waiting list comparison group refers to the period after assignment to the Horizon program wait list.

of the treatment sample had a post-release follow-up period of at least one year, compared to 0% of the matched comparison sample and 2% of the waiting list comparison sample (See Table 4). Therefore, all post-release outcomes should be interpreted with caution. All remaining analyses include released sample members only. Due to the small proportion of treatment and comparison sample members with adequate follow-up periods following release from prison, post-release outcomes between samples are presented through descriptive analyses only.

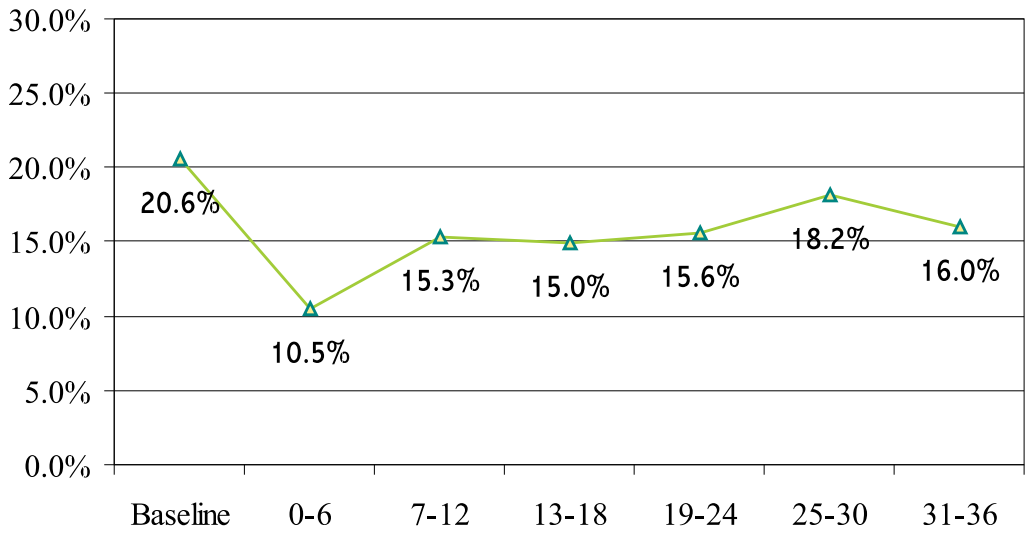
Parole Revocations

A small proportion of the released Horizon sample had their parole revoked during the follow-up period: 10% of all released Horizon participants, and 15% of participants with at least a year of follow-up after release from prison. Of the 17 Horizon participants who had their parole revoked, 8 were for a technical violation, 1 for a new misdemeanor offense, and 8 for a new felony offense. A very small proportion of the treatment and comparison samples had their parole revoked: 5% of the released treatment sample, 0% of the matched comparison sample, and 3% of the waiting list comparison sample. Parole revocations were also equally split between technical revocations and new felony revocations.

Rearrests

About a third of the released Horizon participants were rearrested during the follow-up period; 46% of the released sample when restricted to those with a year of follow-up only (See Table 5). Arrest types were most often "other" offenses (72%), followed by violent, property, and drug offenses. Those who were rearrested averaged 1.9 rearrests during the follow-up period and 7.6 months from release until their first rearrest. Those with at least one prior incarceration were significantly more likely to be rearrested for a drug

Figure 3. Proportion of all Horizon participants with at least one segregation stay



crime, had significantly more rearrests in the follow-up period, and had significantly more total charges across all rearrests.

There were no significant differences in the proportion of rearrest comparing the treatment sample to the matched and waiting list comparison samples (See Table 6). Very few sample members were rearrested (19% of the treatment sample, 15% of the matched comparison sample, and 20% of the waiting list comparison sample), likely due to the short follow-up period. Treatment sample members did have a longer time to first rearrest compared to the matched comparison sample (3.5 months and 1.4 months, respectively), and a lower number of rearrests. Rearrests were most often for "other" offenses, followed by property offenses for treatment and matched comparison samples. The waiting list sample had a greater proportion of new drug arrests.

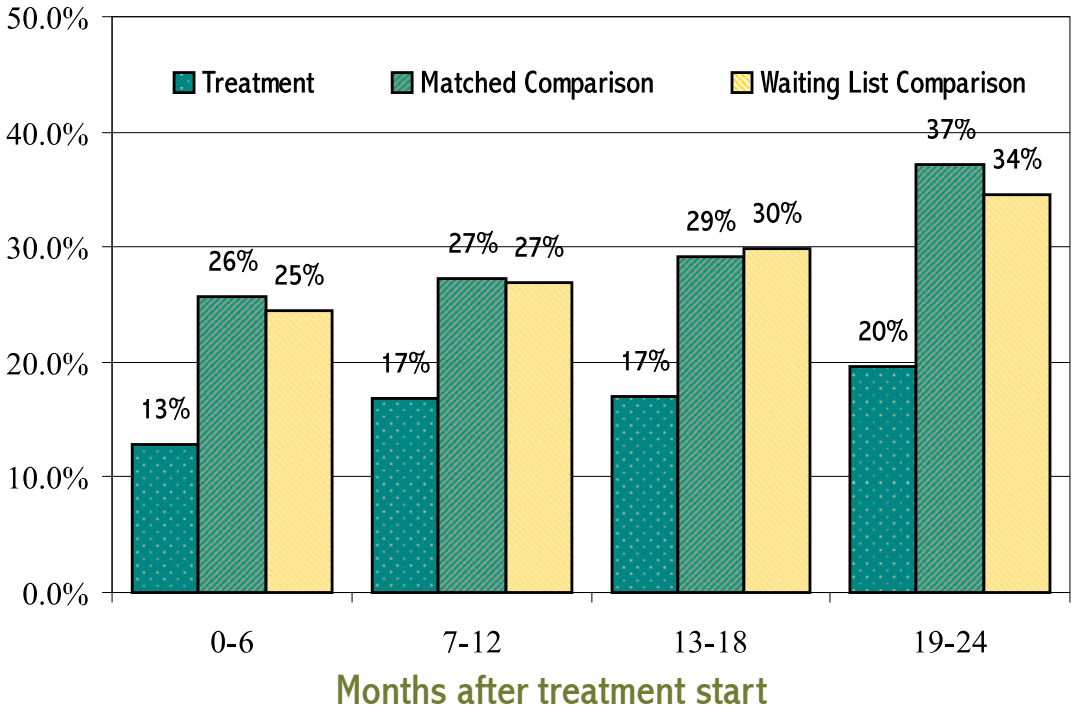
Reoffenses

Reoffenses are those rearrests that result in a new prison or community corrections sentence in the state of Florida. About 8% of the Horizon sample reoffended after release (13% of those with at least a year of follow-up after release). Reoffenses were most often for a property crime, and Horizon participants averaged more than ten months after release until the date of their first reoffense. When examining treatment and comparison samples, only 2 treatment sample members reoffended, compared to 2 matched comparison and 7 waiting list comparison sample members. Treatment sample members averaged 6.7 months from release to first reoffense, compared to 1.6 months for matched sample members and 4.3 months for waiting list sample members.

Fulfillment of Child Support Obligations

The Department of Revenue tracks data related to child support obligations, including whether a sample member has any open child support cases, the amount of current child support charges, the amount of accrued child support, and the amount paid to fulfill both current and accrued child support obligations. More than half of the released Horizon participants had an open child support case (59%) during the study period, but only 11 releasees accrued any child support charges during this time. Those with open cases were obliged to support 2.5 children, on average, while those open cases that also accrued charges during the study period averaged support of 3.3 children. Horizon sample members paid an average of 60% of all charges (accrued and current) during the study period, and 47% of current charges. The proportion of charges paid was higher for sample members with at least a year of follow-up. Horizon

Figure 4. Proportion of sample with at least one segregation stay



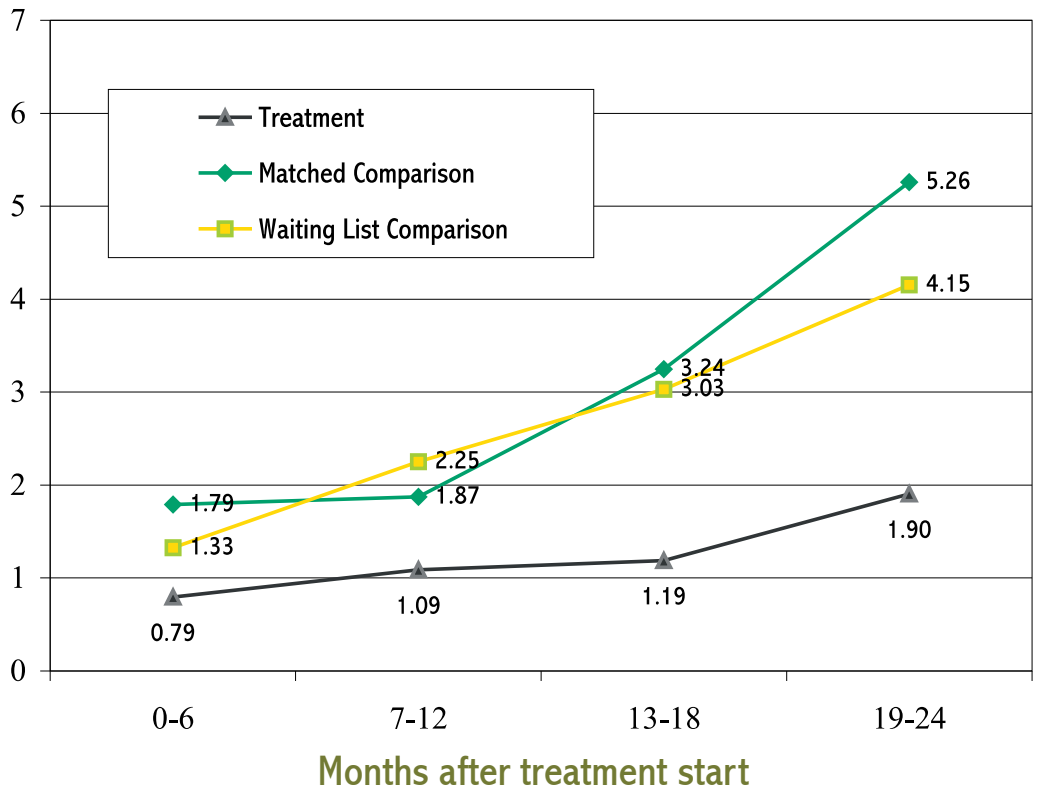
participants with a positive program exit reason (i.e., graduated or release from prison) paid a significantly greater proportion of their total and current child support charges.

Across study treatment and comparison samples, a little less than half the treatment and waiting list comparison samples had an open child support case (45% and 41%, respectively). Four treatment sample members had an open case that accrued child support charges during the study period, compared to 2 matched and 14 waiting list comparison sample members. Treatment sample members were obliged to support more children (3.7) than the comparison samples, on average (2.4 children in the matched comparison group and 2.5 children in the waiting list comparison group). The treatment sample paid 41% of its total child support obligations, compared to 45% for the matched comparison sample and less than 1% for the waiting list comparison sample.

Conclusions

Several of the outcomes investigated in the study suggest that the Kairos Horizon program is having a positive impact on pre-release measures of prison safety and post-release measures of recidivism (e.g., delaying the onset of rearrest) and support of dependent children. Overall, the treatment experience of the Horizon sample was largely as expected. Most participants remained in the program for at least three months, and the majority also successfully completed the program. About a third left the program for neutral reasons, such as voluntary withdrawal and administrative moves within the state correctional system. Time in treatment and discharge reason were significant predictors of the incidence of discipline reports and segregation stays within this sample. Kairos Horizon participants experienced reductions from baseline to all follow-up points in the incidence of discipline reports, the average number of discipline reports per month, and the incidence of segregation stays. A nega-

Figure 5. Average number of segregation days per month by sample and follow-up period interval



tive program discharge reason and spending less than three months in treatment significantly predicted a higher incidence of discipline reports and a higher incidence of segregation stays both during and after the expected program period of one year. Other available background variables did not mediate the impact of these treatment characteristics on the in-prison safety outcomes. It is possible that other characteristics, not collected or measured in this study, predict both time in treatment and treatment discharge reason as well as the number of discipline reports and segregation stays. Furthermore, it is likely that the negative discharge reason itself led to a discipline report or a segregation stay immediately after program exit. Alternatively, spending more time in treatment and successfully completing treatment may translate into reductions in discipline reports and segregation stays, thereby promoting prison safety and conserving prison staff resources.

Results from the between sample comparisons also support this conclusion. Kairos Horizon program participants had a lower rate of discipline reports and segregation stays than comparison sample members throughout the follow-up period, but particularly so in the period immediately following program entry. While some of the significant differences between the treatment and waiting list comparison samples were mediated by background characteristics (e.g., age), program participation appears to may be enhance prison safety by providing a structured and segregated living environment for prisoners.

Although impending release from prison is a prerequisite for Horizon program participation, most treatment sample members were not released during the study period, and an even smaller proportion had at least a year of follow-up after their release. This limitation is due to the necessary data collection end date and sample definitions to enhance

Table 3. Release Status for all Horizon Classes

	All Horizon Classes (N = 413)	
	N	%
Incarcerated	248	60.0%
Released	165	40.0%
Released with at least a year of follow-up	92	22.3%
	Mean	SD
Average time in follow-up period after release	15.285	10.137

Table 4.Release Status for Treatment and Comparison Samples

Months after study start	Treatment* (N = 157)		Matched Comparison (N = 157)		Waiting List Comparison** (N = 248)	
	N	%	N	%	N	%
Incarcerated	115	73.2%	124	79.0%	156	62.9%
Released	42	26.8%	33	21.0%	92	37.1%
Released with at least a year of follow-up	8	5.1%	0	0.0%	6	2.4%
	Mean	SD	Mean	SD	Mean	SD
Average time in follow-up period after release	7.833	4.716	3.483	2.687	5.191	3.675

* Treatment sample members had a significantly longer follow-up period after release.

**Waiting list sample members were significantly more likely to be released during the follow-up period.

internal validity. All findings related to post-release behavior should therefore be interpreted with caution. Among Horizon program participants, very few releasees were rearrested during the follow-up period (33%), and even smaller proportions were reincarcerated (8%) or had their parole revoked (10%). As expected, these proportions increased when the sample was restricted to those former prisoners with at least a year of post-release follow-up. Still less than half of the former Horizon participants were rearrested during the high-risk period immediately following release from prison—a finding that is much better than the nationally reported 66% recidivism rate.

While treatment and comparison samples had similar proportions that were rearrested during the follow-up period, the treatment sample had a longer time until that first rearrest, and a lower number of charges across all rearrests during the study period. Further research is required to determine whether observed differences in recidivism will persist over time. The outcome evaluation, however, suggests that the Horizon program promotes both in-prison safety and public safety. Furthermore, those who successfully complete the program may have more positive outcomes, particularly related to discipline reports, segregation stays, onset of

Table 5. Horizon Sample Rearrests

	All released sample members (N = 165)		Released sample members with at least a year of follow-up (N = 92)	
	N	%	N	%
Rearrested				
Yes	54	32.7%	42	45.7%
No	111	67.3%	50	54.3%
Rearrest type*				
Violent	15	27.8%	11	26.2%
Property	11	20.4%	11	26.2%
Drug[1]	8	14.8%	8	19.0%
Other	39	72.2%	29	69.0%
For those rearrested:	Mean	SD	Mean	SD
Number of rearrests[1]	1.926	1.211	2.071	1.276
Months to first rearrest	7.563	6.335	8.870	6.462
Average number of charges per arrest	1.633	0.858	1.690	0.923
Total number of charges across all arrests	3.167	2.575	3.429	2.697

* Percents are of sample members who were rearrested. Categories are not mutually exclusive.

rearrest, and payment of child support obligations. Though the outcome evaluation design has a number of limitations, the pre- and post-release measures are promising and lend considerable empirical support to anecdotal claims of program effectiveness as indicated in process evaluation findings.

SUMMARY

This brief summarizes results of the Kairos Horizon program evaluation at Tomoka Correctional Institution. The study incorporated two main components to evaluate the program. First, the process evaluation examined how the program operates in a correctional setting. This component of the study was informed by program documentation, interviews, and focus groups with prison administration, correctional officers, work supervisors, other prison staff, program directors and coordinators, program volunteers, and the participants themselves. Second, the impact evaluation assessed the outcome of program participation on pre- and post-release measures. This component of the study involved the comparison of a treatment sample to a matched comparison sample and a waiting list comparison group.

Process evaluation results show that correctional stakeholders recognized the need for and tremendous potential of the Kairos Horizon program. The program requires a minimal investment of prison resources, and offers a substantial return on investment including increased prison and public safety. Other results show that program stakeholders identified three main components that were essential to program success. First, the role of the volunteers is critical. Local

Table 6. Treatment and Comparison Sample Rearrests

Measure	Treatment (N = 42)		Matched Comparison (N = 33)		Waiting List Comparison (N = 92)	
	N	%	N	%	N	%
Rearrested						
Yes	8	19.0%	5	15.2%	18	19.6%
No	34	81.0%	28	84.8%	74	80.4%
Rearrest type*						
Violent	0	0.0%	1	20.0%	1	5.6%
Property	3	37.5%	2	40.0%	3	16.7%
Drug	0	0.0%	0	0.0%	6	33.3%
Other	7	87.5%	4	80.0%	12	66.7%
For those rearrested:	Mean	SD	Mean	SD	Mean	SD
Number of rearrests	1.375	0.744	1.800	0.837	1.333	0.594
Months to first rearrest	3.503	3.907	1.393	0.973	3.198	3.205
Average number of charges per arrest	1.292	0.452	1.167	0.236	1.972	1.529
Total number of charges across all arrests	1.875	1.356	2.200	1.304	2.556	2.007

church volunteers offer a low-cost means of running the program and provide a critical link to the community. These volunteers also provide a real-world perspective that can be more credible for prisoners than programs that are run by prison staff. In addition, volunteers serve as positive role models fostering pro-social relationships between prisoners, family members, and others on the outside. Second, the segregated living environment is essential to promoting personal accountability. Participants living in this therapeutic community are committed to the goals of the program and reinforcing ethical and moral values. Participants are also encouraged to take responsibility for their own actions and to monitor the activities of others. As a part of this caring community, participants are free from many fears that accompany general population dorms. In addition, the program components themselves were identified as the keys to personal transformation, particularly the "pain" programs of Quest, Making Peace with Your Past, and the Way Home. These intensive programs are facilitated by outside volunteers and compel participants to confront the factors that brought them to prison.

Impact evaluation results show that Kairos Horizon program participants had significantly lower rates of discipline reports and segregation stays—compared to both the matched and waiting list comparison samples. These findings lend support to the claim that program participation promotes a safer correctional environment, particularly during and immediately following program participation. Other results show that fewer than one-third (32.7%) of program participants were rearrested during the follow-up period (averaging 15 months)—and that participants had fewer total charges across all arrests. While similar proportions of released treatment and comparison sample members were rearrested, the treatment sample had a longer period of time until their first rearrest. Thus, Horizon program participation appears to delay the onset of rearrest among returning prisoners. In addition, results show that program graduates are more likely to fulfill their child support obligations.

The aforementioned findings contribute to a growing body of empirical evidence demonstrating the efficacy of strong FBCOs in providing social services. The Kairos Horizon program is uniquely positioned among best faith-based practices providing a variety of spiritual and secular services to support the successful reintegration of returning prisoners. Among the key lessons learned is that engaging FBCOs in collaborative problem-solving partnerships facilitates the process of prisoner reentry—and individuals rediscovering their compassion for children, families and communities.

Endnotes

The final report including references is available upon request at www.caliber.com.

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